

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>RP</i>		<i>6/12/98</i>
O.I.P.E. CLASSIFIER		<i>716090</i>	<i>6-16-98</i>
FORMALITY REVIEW	<i>P</i>		<i>10/90</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	3/6/98
2	✓	✓	8/29/98
3	✓	✓	12/03
4	✓	✓	6/04
5	✓	✓	2/05
6	✓	✓	
7	✓	✓	
8	✓	✓	
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47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	6/04
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Claim	Final	Original	Date
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**BEST AVAILABLE COPY**  
 If more than 150 claims or 10 actions  
 Start additional sheet here  
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